

NC Medicaid Managed Care Post-Payment Reviews



& Program Integrity Activities



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References/Authority:

2

42 CFR 438.240 (Quality Assessment and Performance Improvement)

42 CFR 455 (Program Integrity)

42 CFR 456 (Utilization Control)

42 CFR 456.23 (Post-Payment Review Process)

Session Law 2011-264 (Statewide Expansion of the 1915 (b)(c) Waiver)

Session Law 2009-451 (Streamline paperwork and administrative burden on LMEs and providers)

References/Authority

3

NCGS 122-C MH/DD SAS Services

NCGS 108C (Medicaid and Health Choice Provider Requirements)

10A NCAC 27 G

Medicaid Clinical Coverage Policies (8A, 8C, 8D-1, & 8D-2)

Innovations Waiver

Post-Payment Reviews:

4

- Post-Payment Reviews (PPR) are used to assure that payments are made for services delivered to beneficiaries. Any overpayments identified by this review are required to be recouped or collected.
- PPR involve examination of claims, payment data, medical record documentation, financial records, administrative research, application of Medicaid coverage policies, and any additional information to support provider's operations and processes. Post-payment reviews may be conducted via on-site visit or desk review.
- PPR are about monitoring the providers to make sure they are in compliance with clinical coverage policies, state, and federal rules and regulations

Post-Payment Reviews:

5

- PPR assure that providers are paid appropriately and are in compliance with Medicaid clinical coverage policies according to State Plan, Waiver, and Prepaid Inpatient Health Plan.
- PPR tools shall be used when LME-MCO conduct special audits or investigations related to program integrity activities in accordance with DHHS/ LME-MCO Contract, 42 CFR 438.608, 42 CFR 455.14, and 42 CFR 456.23.

Advancement of Gold Star Monitoring

6

- Adopted from Cardinal Innovations Healthcare Solutions formerly known as Piedmont Behavioral Healthcare (PBH).
- Legislation clearly states we will adhere to the PBH model.
- Department has worked with Cardinal Innovations to modify and enhance Gold Star Monitoring for Statewide implementation.

Placement on the Provider Profile

7

- Gold Star monitoring placements:
 - Licensed Independent Practitioners
 - Preliminary
 - Preferred
 - Provider Agencies
 - Provisional
 - Routine
 - Preferred
 - Exceptional
 - Gold Star

Post-Payment Review Tools

8

- Child and Adolescent Day Treatment
- Diagnostic Assessment
- Generic
- Innovations
- LIP
- Outpatient Opioid Treatment
- PRTF
- Residential Services

Generic PPR Tool

9

- Ambulatory Detoxification
- Assertive Community Treatment Team
- Community Support Team
- Intensive In-Home Services

Generic PPR Tool

10

- Medically Supervised or ADATC Detoxification/Crisis Stabilization
- Mobile Crisis Management
- Multisystemic Therapy (MST)
- Non-Hospital Medical Detoxification

Generic PPR Tool

11

- Partial Hospitalization
- Peer Support Services
- Professional Treatment Services in Facility-Based Crisis Program
- Psychosocial Rehabilitation

Generic PPR Tool

12

- Substance Abuse Comprehensive Outpatient Treatment Program
- Substance Abuse Intensive Outpatient Program
- Substance Abuse Non-Medical Community Residential Program
- Substance Abuse Medically Monitored Community Residential Program

Post-Payment Review Worksheets

13

- Staff Qualifications
- Staffing ratios

*optional

Gold Star Monitoring Process for Providers

14

Two Types of Contracted Providers

- Licensed Independent Practitioners (LIPs)
- Provider Agencies

Planning the On-Site Review



Preparation and Planning

16

- Determine the timeframe or audit period
- Pull claims for the entire audit period
- Pull a random sample of claims from the claim audit period (10/30)
- Select appropriate tools for the service type pulled in the claims sample.
- Set-up your Workbook using the random claim sample. You may have to use multiple

Planning the Monitoring Event

17

- Decide on the post-payment review tools to be used during the review based on the range of services the agency/LIP provides.

Example:

H0040

H2015HT

H2012HA

H2022

H0015

H2017

90791

90832

ACTT

Community Support Team

Day Treatment

Intensive In-Home

SAIOP

PSR

Psychiatric Diagnostic Evaluation

Psychotherapy, 16-37 Minutes

Initial Monitoring

18

- Occurs 90 days after the provider submits the first claim
- Sample Size = 10
- Successful completion of review - Provisional Status

Routine Review

19

- Occurs annually
- Sample Size = 30
- Successful completion of review
 - Provider Agencies - Routine Status
 - LIPs – Preliminary Status

LIP PPR Tool

20

- Tool
- Guidelines
- Citations
- PPR Action

Generic PPR Tool

21

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- Tool
 - Guidelines
 - Citations
 - PPR Action

Other Concerns / Red Flags



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- Systemic issues or patterns in a post-payment review
 - Reports from other LME-MCOs
 - Conducting routine PPR and simultaneously receiving allegations /quality of care concerns

Collaboration with Quality Management, Provider Network, and Special Investigations/Program Integrity Units

Tools for Program Integrity Activities

23

- post-payment review (PPR) tools are to be used for Program Integrity activities including prepayment program
- Not all items on a PPR tool must be used during an investigation
- Certain questions on the PPR tool can be used to tailor your investigation.

Completing the entire PPR tool during an investigation is encouraged.

Tools for Program Integrity Activities

24

- PPR tools allow for documentation of comments and observations of the Beneficiary's records
- The PPR tools will provide a snapshot of provider's performance in regards to meeting administrative and clinical requirements.

QUESTIONS or COMMENTS



Please send any questions or comments about
the Gold Star Provider Monitoring Tools or
process to the following mailbox:

gold.star.provider.monitoring@dhhs.nc.gov

or to

provider.monitoring@dhhs.nc.gov

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